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ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD
1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007
PHONE (602) 364-1PET (1738) FAX (602) 364-1039
VETBOARD.AZ.GOV

Received
4/13/21

COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: April 13, 2021

Case Number: 21-124

A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:

Name of Veterinarian/CVT: Ayse Washington

Premise Name: Harmony Holistic Veterinary Care

Premise Address: 826 Sunset Ave

City: Prescott State: AZ Zip Code: 86305

Telephone: (928) 445-7499

B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:

Name: Jazz Nejat

Address: [REDACTED]

City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]

Home Telephone: [REDACTED] Cell Telephone: [REDACTED]

*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

(3)

C. PATIENT INFORMATION (1):

Name: Juneau Nejat
Breed/Species: Husky/Wolf Mix
Age: 13.5 years Sex: F Color: Cream with gray/black

PATIENT INFORMATION (2):

Name: _____
Breed/Species: _____
Age: _____ Sex: _____ Color: _____

D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:

Please provide the name, address and phone number for each veterinarian.

Ayse Washington
826 Sunset Ave
Prescott, AZ 86305

Currently looking for new vet to take care of Juneau's issue.

E. WITNESS INFORMATION:

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

Michael Hormell

Attestation of Person Requesting Investigation

By signing this form, I declare that the Information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: 

Date: 4/12/2021

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

I first took my dog, Juneau, to Harmony Holistic on 9/24/2021 complaining about pain and weakness in Juneau's hip as well as adverse effects from prednisone that had lasted months. We started multiple treatments, and early on Dr. Washington recommended low dose steroid therapy for her mood. I explained that at my previous vet, they had given her steroids and that gave her several side effects that lasted for months after the treatment. Dr. Washington explained that was because the dose was too high, and she would give Juneau a lower dose. We then stopped the discussion about steroids until it was revisited recently in 2/21. We decided that next time Juneau came in (on 3/25/21) we would make the switch from her current regiment to doing a low dose steroid. When that time came, I also advised her that Juneau needed pain control - since she could no longer take her pain medication with steroids. Dr. Washington recommended that we do gabapentin. I explained to her that Juneau did not do well with that medication in the past and I would prefer something else. When I got to the checkout, she had still prescribed gabapentin. I was weary, so I only got 7 capsules to start. I trusted that Dr. Washington would know what she is doing, but I still wanted to be cautious. Upon initiating the steroids and gabapentin, Juneau had side effects immediately and did not have any benefits. She was panting constantly, licking herself nonstop, and drinking three times the amount of water - the same side effects she previously experienced with steroids. She was pacing around the house constantly to where it is affecting our sleep. More than anything, it is incredibly difficult to watch my dog suffer. When I would administer the gabapentin, the same side effects from the past appeared as well. She became greatly disoriented and her hind legs kept falling down. This puts her at greater risk of falling and hurting herself, as she already has hip issues. A week later on Friday, 4/2/21, I called and spoke with Serena to ask Dr. Washington what to do because my dog was in severe distress. She never called back, so I called again and spoke with Simone. She said Dr. Washington said to decrease the dose of the steroids, which I did. I did think it was odd, because she was already on such a low dose that it didn't seem like a dose-dependent response. I still noticed the side effects and no benefit, so on Thursday 4/8/21 I called and spoke with Megan about my concerns. I asked if Dr. Washington could just prescribe the old regimen and we would go back on that. She said Dr. Washington would call me back later that day, but she never did. I called back on Friday, 4/9/21 and spoke with both Simone and Jenny who gave me the run-around. Finally, I was able to get the medication prescribed, but they were out of stock I looked around for a place and found somewhere that could fill it. I called them back and asked them to send the prescription there. At this point, I also told Simone about how I was upset that Dr. Washington would prescribe steroids when I had told her multiple times that I was apprehensive due to her past negative side effects. Not long after, I get a call from one of the owners, Delia Macdonald, telling me that I have communication issues and that I should go elsewhere for Juneau's care. I found the timing of the call to be strange - right after I had complained about Juneau's care officially to the office. At no point did she offer to hear what had happened to my dog or show any concern for her - and neither did Dr. Washington. I believe my dog received inadequate care and I received lack of communication from Dr. Washington regarding care. Over the week that I had called, Dr. Washington never called me to speak about what was going on... CONTINUED ON PAGE 2 (attached)

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PAGE 2 – Dr. Ayse Washington – Jazz Nejat

... even though I was repeatedly told by Megan and Jenny that I would get a call from her. As a pharmacist myself, I understand that doctors can be busy - but to never call back when I was told it would be the same day is unacceptable. I wanted to talk to Dr. Washington herself because the office has had communication issues in the past – so I wanted to verify directly with Dr. Washington what I should do. On top of that, for her to instead make a complaint to the owner instead of speaking to me to deal with the concerns I have about my dog's treatment seems unethical for care. I trusted that Dr. Washington knew what she was doing when she put her on two medications that I told her my dog did not react well to in the past. I also trusted that if it didn't work out, she would be there to assist my dog and me. This is not what happened. While my dog currently has the same symptoms described previously in this statement, who knows what the long-term implications will be to my almost 14-year-old dog's health. It pains me to know I have no help from the very people I trusted her health with. I had informally brought up concerns to Dr. Washington before during our appointments, but she would get defensive and dismissive - claiming that Juneau was doing fine when I felt otherwise. These should have been red flags for me, and I take some responsibility for not getting the hint for what was to come. I did not know that my dog's care would be abruptly abandoned when I firmly spoke up about my concerns. I am a reasonable person and would have gladly preferred to resolve this with the vet and the vet clinic. However, when I brought up my concerns to the vet clinic, I was met with verbal attacks from one of the owners instead of any compassion or care. At the end of this call, I had no choice but to acquiesce and reluctantly allow them to end the care of my dog as I cannot force anyone to do anything. After reaching out to them once more through email with no response, I realized that working with them to solve this would not be an option. So, unfortunately, this is the only avenue I have for the chance for anyone to take responsibility for the damages incurred. Thank you for your time.

AVMA PLIT
Ayse Washington DVM
April 28, 2021

Re: Client Complaint
Case # 21-124

This complaint to the AZ Veterinary Medical Board was filed after a conversation occurred with Ms. Nejat about how she communicated with the staff, and she elected to find another veterinarian to care for her pets. The details leading up to this incident are as follows:

Ms. Nejat started coming to our practice in September 2020 for help with her Husky mix, Juneau who could not stand and walk very well. When Juneau presented she had severe cartilage damage in the left knee. There was a lack of muscle mass and tone related to chronic limping and compensation. We worked over multiple months to reverse this condition as much as possible, and eventually we settled on a continuous schedule of monthly appointments. Juneau also has anxiety and problems with her appetite according to Ms. Nejat. This had been a chronic issue. In October, near the beginning of her care, I suggested to the owner that Juneau might benefit from a trial of Prednisone/Prednisolone. Ms. Nejat had concerns about steroid therapy due to previous experiences of significant side effects when Juneau was prescribed this medication by a different veterinarian. I discussed prescribing this medication at a lower dose, and in harmony with adrenal gland circadian rhythm to help with the anxiety and appetite. We elected to hold off on this therapy because of the owner's concerns and because Juneau was on an NSAID (Carprofen) for pain and could not at that time be given the steroid.

By February 18, 2021, Juneau was doing much better and Ms. Nejat agreed to a trial period that would involve first weaning her off the NSAID and then starting a low dose of Prednisolone in March with her next appointment. On March 18, 2021, when Ms. Nejat brought Juneau in she was concerned that pet was panting heavily and drinking more water. Some of this behavior was thought to be anxiety or pain, and after discussion about these symptoms, it was decided to proceed with the plan of starting her on low dose Prednisolone to see if it would make any difference. I prescribed 2.5mg once per day with a plan to increase in a few weeks to 5mg once per day if she did not show any side-effects at the 2.5mg dose. I also prescribed a 3 month supply of Gabapentin 100mg capsules: 1/2 capsule AM and PM as needed for pain. O declined the 3 month supply of Gabapentin and instead requested only 7 capsules. On April 2, 2021, Ms. Nejat called to advise us that Juneau was having increased thirst and urination on the Prednisolone. Because I did not want her to have to wait to speak with me directly, I asked the staff to speak with her and to tell her to lower the dose of Prednisolone by 1/2 the amount to see if that would reduce the thirst and urination that the owner reported. She was also concerned that the Gabapentin dose of 1/2 of a 100mg capsule was causing the pet to not stand well, yet she requested that we write a new script for this medication to Walgreens. The prescription was sent. The next day, April 3rd, the owner called to request that we provide free

Gabapentin from the clinic due to the fee structure of the Gabapentin. That phone call went directly to the management and the script was altered to allow for the extra capsules. I was only told that Ms. Nejat wanted free Gabapentin capsules because price of the capsules from the clinic was too high. I was also told that Alex spoke with her about this.

On April 8, 2021 I received a message saying that Ms. Nejat has stopped the Prednisolone because she was not happy with the side effects that Juneau was experiencing while on the medication. This message was not posed to me as a question or a concern, simply a statement of treatment adjustment by the owner. By discontinuing the therapy she removed the cause for concern about increased thirst and urination. On April 9th Ms. Nejat called requesting to restart the prescription for Carprofen for pain. Upon receiving this call, the staff stopped me between appointments to ask if I could approve the request. I immediately made a written script of the Carprofen available to the client. I offered the written script instead of the in-clinic script because of the recent discussion of the client being unhappy with our prices, and this would allow her to get it from Costco or Walmart where it is less expensive. Also, I wrote the script so it would last the client 3 months, again recalling her concerns about the costs associated with the Gabapentin prescriptions for smaller numbers of pills, and knowing that she was tolerant of the Carprofen in the past. It was my intention to discuss her concerns further with our next monthly planned appointment for April.

After my next appointment the staff advised me that Ms. Nejat was upset that the script was for so many tablets and she wanted to get fewer. I authorized the script to be adjusted to the amount she wanted. I went into my next appointment and when it was done the staff came back and told me she was still upset and wanted to just get the medication from us. I told them to tell her I would call her at the end of appointments that day and I went into my next appointment. It is my understanding that while I was in that appointment, Ms. Nejat called back and was rude or belligerent to our staff and even made one or two of the receptionist's cry. The staff discussed this situation with Dr. Macdonald. She then looked for me to ask my experiences with Ms. Nejat's communication. I advised Dr. Macdonald that I planned to call Ms. Nejat that evening and that yes, she had a reputation with the staff of being difficult, that she was normally unhappy with some aspect of the visit or service, but that she was never rude to me in the exam room. I shared with her that even from her first visit, Ms. Nejat expressed her concerns as complaints to our support staff about things like the floors being too slippery for her dog, or the wait to be seen. Although the interactions between myself and Ms. Nejat were professional, she developed and continued to cultivate a reputation of being a challenge to communicate with amongst our support staff. Dr. Macdonald felt compelled to contact Ms. Nejat to clarify and set expectations around communicating with the staff in a kind and respectful manner so that we could better address her concerns and requests. It is my understanding that during this phone call, Ms. Nejat was berating and extremely rude to Dr. Macdonald and the conversation ended with an agreement that Ms. Nejat would seek veterinary care for Juneau and her other dog Bodhi, elsewhere. Following this event, Ms. Nejat placed multiple bad online reviews about the practice and also sent a letter of complaint to the AZ Veterinary Medical Board.

These are the events as I best understand them to have taken place.

Ayse Washington DVM

DOUGLAS A. DUCEY
- GOVERNOR -



VICTORIA WHITMORE
- EXECUTIVE DIRECTOR -

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

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INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: AM Investigative Committee: Robert Kritsberg, DVM - Chair
Christina Tran, DVM - **ABSENT**
Carolyn Ratajack
Jarrod Butler, DVM
Steven Seiler

STAFF PRESENT: Tracy A. Riendeau, CVT – Investigations
Marc Harris – Assistant Attorney General

RE: Case: 21-124
Complainant(s): Jazz Nejat
Respondent(s): Ayse Washington, DVM (License: 7408)

SUMMARY:

Complaint Received at Board Office: 4/13/21
Committee Discussion: 10/5/21
Board IIR: 11/17/21

APPLICABLE STATUTES AND RULES:

Laws as Amended August 2018
(Lime Green); Rules as Revised September
2013 (Yellow).

Respondent began seeing "Juneau," a 13+-year-old female Husky mix in September 2020 for management of severe cartilage damage in the left knee and anxiety issues.

In March 2021, the dog was started on a low dose prednisolone trial; gabapentin was also prescribed as needed for pain.

In April 2021, Complainant reported the dog was having increased thirst and urination therefore Respondent recommended decreasing the dose of prednisolone. Complainant further reported that the gabapentin was causing the dog to not stand well, however she requested another written prescription.

Complainant elected to stop the prednisolone due the side effects and requested to start the dog back on carprofen; Respondent agreed and wrote a prescription.

According to Complainant, Respondent would not return her calls to discuss the care and treatment of the dog. Due to Complainant's disrespectful conduct towards staff, she was terminated as a client.

Complainant was noticed and appeared telephonically.
Respondent was noticed and appeared with attorney David Stoll.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: *Jazz Nejat*
- Respondent(s) narrative/medical record: *Ayse Washington, DVM*
- Consulting Veterinarian(s) narrative/medical record: *Delia MacDonald, DVM – Premises owner.*

PROPOSED 'FINDINGS of FACT':

1. In September 2020, Respondent began seeing the dog that could not stand or walk very well. The dog had severe cartilage damage to the left knee. There was lack of muscle mass and tone related to chronic limping and compensation. Respondent stated that they worked for multiple months to reverse the dog's condition as much as possible and eventually settled on a continuous schedule of monthly appointments. The dog also had anxiety and problems with her appetite according to Complainant.

2. In October 2020, Respondent suggested to Complainant that the dog may benefit from a trial of prednisolone. Complainant expressed concerns about steroid therapy due to a previous experience of significant side effects when the medication was prescribed by a previous veterinarian. Respondent discussed prescribing the medication at a lower dose; it was elected to hold off starting steroids at that time due to Complainant's concerns and the dog being on an NSAID at that time.

3. On February 18, 2021, the dog was presented to Respondent for evaluation. The dog was currently on carprofen ½ tablet, trazadone, and ligaplex. Historically, the dog had bad hips – Complainant did not believe the dog could hold herself up for too long however she had a video of the dog running in the yard. The dog bunny hopped but was moving well.

4. Upon exam, the dog had a weight = 55.4 pounds, a temperature = 99.9 degrees, a heart rate = 130bpm, and a respiration rate = not recorded. Respondent noted that dog was 2/5 lame on the left rear leg; could stand normal – the left stifle was thickened, but no crepitus with flexion. The left sacroiliac joint had bone crunching with weight shifting. Respondent's assessment was that the dog had improved strength and mobility in the rear but the dog will flop down when sitting and cannot always get straight up from sitting. She recommended left hamstring massage and laser treatment to the left and right stifles. Adequan was administered, acupuncture was performed – it was recommended starting nitric oxide (add to food) and starting low dose prednisolone as a hormone replacement and to help with overall anxiety. Complainant will need to stop carprofen a week prior.

5. On March 18, 2021, the dog was presented to Respondent for a recheck and treatment. Complainant reported that the dog was currently on carprofen 100mg twice a day, ligaplex, bone broth and adequan injections. Complainant further reported that the dog was having panting episodes and had increased thirst. Upon exam, the dog had a weight = 55.2 pounds, a temperature = 100.2 degrees, a pulse rate = 100bpm and a respiration rate = 32rpm. Respondent noted the same issues with the left rear leg and lameness. The dog was able to rise from laying and sitting.

6. The dog underwent laser treatment, acupuncture, and administered adequan. Respondent recommended massage and magnet treatment as well. She prescribed M/S support,

gabapentin 100mg (1/2 capsule twice a day), and prednisolone 5mg – ½ tablet once a day in the morning and consider increasing to 1 tablet in a few weeks. Complainant was instructed to wait a week as the dog had the last NSAID this day.

7. Respondent stated that Complainant did not want a three-month supply of gabapentin therefore Respondent only gave her 7 capsules.

8. On April 2, 2021, Complainant called to report the dog was having the same side effects as prior steroid usage – increased thirst and panting. Additionally, Complainant did not like the dog on gabapentin as the dog had difficulty standing when taken. However, Complainant requested a written prescription for the gabapentin so she could have the prescription filled by a local pharmacy.

9. Respondent asked staff to call Complainant to verify the dose of prednisolone being given to the dog and to recommend reducing the dose by half to see how the dog does. Respondent also wrote a prescription for 90 gabapentin.

10. On April 3, 2021, Complainant called and requested Respondent's premises provided free gabapentin from the premises due to the fee structure. The call went directly to management and the prescription was changed to allow for the extra capsules. Respondent stated she was told of Complainant's request and management handled the matter.

11. On April 8, 2021, Respondent received a message that Complainant called to report that due to the dog's panting, pacing, increased thirst and anxiety, she elected to take the dog off prednisolone completely. Respondent assumed this was an update and not a request to call since there was no question posed.

12. On April 9, 2021, Complainant called and requesting to restart carprofen for pain. In between appointments, Respondent wrote a three-month prescription for Complainant – she felt a prescription would be better for Complainant due to the previously voiced concerns on medications. Later that day, Complainant called and was upset that so many tablets were prescribed therefore Respondent approved changing the number of tablets. Respondent was then advised that Complainant was upset and just wanted to get the medication from the premises. Respondent advised staff that she would call Complainant that evening when she finished her appointments that day.

13. Respondent stated that while she was seeing appointments, Complainant called back; she was rude and belligerent to staff and made two receptionists cry. Staff relayed this information to the premises owner Dr. MacDonald. When asked about Complainant, Respondent relayed that while she had not had a problem with Complainant, she was often difficult to deal with according to staff and she was normally unhappy with some aspect of her visit.

14. Dr. MacDonald contacted Complainant to discuss her behavior and request her to be kind and respectful when communicating with staff. During the call, Complainant berated her and her staff therefore it was suggested that Complainant may be better served elsewhere due to her continued complaints with the premises. A termination letter was sent to Complainant.

COMMITTEE DISCUSSION:

The Committee discussed that at the initial visit there was no information with respect to the dog's medical history. However, they did not feel this was a concern.

The Committee also discussed the lack of communication after the medication change. They commented that the dog was geriatric and there seemed to be adjustments to the dose of prednisone and gabapentin, which is common when dealing with an aged animal and attempted to find the right balance. Medications that previously worked may not work in the future.

The Committee discussed that there were some expectations on Complainant's part due to her profession as a pharmacist, that were not met by Respondent.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the Veterinary Practice Act occurred.

COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

Vote: The motion was approved with a vote of 4 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.

TR

Tracy A. Riendeau, CVT
Investigative Division